PAIEN	APPLICATION Substitute	FEE DETERMIN For Form PTO-875	ATION RECORD	ormation undess it d	PTO/SB/06 Chrough 7/31/2006. OMB 06 S. DEPARTMENT OF COM splays a valid OMB control of lication or Onches Above
	•			7	lication or Operat Number
	LAIMS AS FILED - I				
. FOR .		(Calumn 2)	SMALL E	NTITY OR	OTHER THAN
BASIC FEE	MUMBER FILED	NUMBER EXTRA	BAYE		SMALL ENTITY
(37 CFR 1.16(e)) TOTAL CLAIMS			RATE	FEE	RATE FE
(37 CFR 1.16(c))	minus 20 =	1.		OR.	1
INDEPENDENT CLAIMS			X S=	OR	
	minus 3 =	•	x		X
MULTIPLE DEPENDENT CLA		R 1.15(d)	7	OR	X 5 0
" If the difference in column t	is less than zern enter an		- 11	OR	4.
			TOTAL	OR	70-
2 13	AS AMENDED - PA	RTII		- OK	TOTAL
5-13-05 (Colum	nn t) .c.	stumn 2) (Cotumn 3)			•
S/ CL	IMS.	HEST (Cotumn 3)	SMALL ENTI	TY OR	OTHER THAN
S/D REMA	ER NU	MBER PRESENT	SAYS .		SMALL ENTITY
AFT AMEND AMEND (37 CFR 1.16(c))	PAIR	FOR	1 116	DDI. DNAL	RATE ADDI-
(37 CFR (.16(c))	a Minus "	2 -		EE	TIONAL
(37 CFR 1.16pt)	Minus ***	5 1.	x : 25 =	OR .	x:50.
FIRST PRESENTATION OF M	ULTIPLE DEPENDENT OF		x 1/00 =	OR	200
	The chocki about	(37 CFR 1.16(d))	+1/BO.	7	
-2-06			TOTAL		:360-
todumn		nn 2). (Column 3)	ADD'L FEE	OR A	OTAL DD'L FEE
CLAIMS REMAINII		ST	<u></u>		
AFTER AMENDME	PREVIOU	SLY FXTRA	RATE ADD		RATE ADDI
(3) CFR 1.16(cl) 27	Minus **	OR -	TIONA	4	ADDI.
Independent DT OFR 1.1001)	Minus		x : 25 =	7	FEE
FIRST PRESENTATION	1.		x s_10Q=	, , , , , ,	50.
FIRST PRESENTATION OF MULT	IPLE DEPENDENT CLAIM	17 CFR 1.16(d))		OR X S	200=
• • •			+s/BQ=	OR + 5	1 ·
(Column 1)	20.		ADD'L FEE	OR ADD	L FEE
CLAIMS	(Column 2 HiGHEST	(Column 3)			
REMAINING AFTER	NUMBER	PRESENT	RATE ADDI-	7	
Total .	PAID FOR	Y EXTRA	TIONAL	, RA	1 4001.
pendent		-	FEE FEE	1	TIONAL FEE
FR 1.16(b))	Minus			OR X . 5	0=
ST PRESENTATION OF MULTIPLE	DEPENDENT CLARA		:100a	OR x s Z	20:
	(37 C		:180.		
entry in column 1 is lace the	the natural section is	T	DTAL	TOTAL	2
entry in column 1 is less that Highest Number Previously Highest Number Previously I Highest Number Previously I	Paid For IN THIS SPACE	e "O" in column 3.	-	OK ADD'E'F	EE
Highest Number Previously Pa	aid For IN THIS SPACE i	a less than 3' euler 3.	•		
in a information is required t	v 37 CCD 4 CO	ent) is the highest numb	er found in the appropriate plain or retain a benefit by 1.14. This collection is est Time will vary depending to		·

USF including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. inclu

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2 . .